TESTIMONY OF MARTHA B. KNISLEY, DIRECTOR DEPARTMENT OF MENTAL HEALTH

BEFORE THE
SUBCOMMITTEE ON
PUBLIC INTEREST
CHAIRED BY PHIL MENDELSON

ON LABOR-MANAGEMENT PARTNERSHIPS IN THE DISTRICT OF COLUMBIA

Thursday, December 18, 2003 9:30a.m. Room 412 John A. Wilson Building 1350 Pennsylvania Avenue, N.W. Washington, D.C. 20004

TESTIMONY OF MARTHA B. KNISLEY, DIRECTOR DEPARTMENT OF MENTAL HEALTH BEFORE THE SUBCOMMITTEE ON PUBLIC INTEREST, CHAIRED BY PHIL MENDELSON ON LABOR-MANAGEMENT PARTNERSHIPS IN THE DISTRICT OF COLUMBIA THURSDAY, DECEMBER 18, 2003/9:30A.M.

- Good morning, Chairman Mendelson, members of the Subcommittee on Public Interest and members of the Council. I am Martha B. Knisley, Director of the Department of Mental Health. Thank you for this opportunity to discuss our labor/management relationship within DMH.
- The unions representing DMH employees and my management team currently are not involved in a formal Labor-Management Partnership Council; however, we are meeting regularly on several different levels to develop the foundation to reinstitute our Council.
- Not long ago, I met with Josh Williams, head of the Metropolitan Washington Labor Council, to seek his counsel to overcome the difficulties DMH is experiencing in creating and sustaining a sound Labor-Management Partnership Council.
- That meeting helped us to jumpstart our efforts to bridge the gaps between labor and management. Since September, I have met personally with all unions on a monthly basis and conducted our December meeting yesterday.
- I am hopeful that these meetings will result in a renewed spirit of partnership.
- Our workforce consists of 1,267 union employees who are represented by seven unions: ASFCME/AFGE; Social Workers Union; Psychologists Union; Doctors Council; Committee of Interns and Residents; D.C. Nurses Association and the Metal Trades Union.

- Every aspect of our work necessitates the full involvement of our union employees to ensure that consumers of mental health services receive the quality care they deserve. I must acknowledge that DMH union employees demonstrate on a daily basis their commitment to consumers.
- Today's Department of Mental Health is a very different organization when compared to 2001 when we signed a Labor Management Partnership Council charter. The challenges of maintaining that same level of partnership through a major restructuring of the Department and simultaneous implementation of the Court-ordered Plan and union contract negotiations overwhelmed our best intentions. Therefore, we are starting again.
- The Department is divided into three major entities: the Mental Health Authority, which regulates the mental health system; St. Elizabeths Hospital, which provided inpatient psychiatric care; and the Community Services, which provided community-based services within what we call the Mental Health Rehabilitation Services system.
- With implementation of the Court-ordered Plan, we introduced the Mental Health Authority, radically overhauled the Community Services Agency and consolidated St. Elizabeths Hospital's operations on the east campus. While our LMPC remains in suspension, nevertheless, these entities have ongoing relationships between labor and management to address employees' issues.
- The hospital experienced the least amount of change in its operations. Its primary vulnerability arose when the Centers for Medicare and Medicaid Services' survey identified the over-use of seclusion and restraints and other problems with patient care and quality assurance. Labor and hospital management overcame these problems by cooperating on their solutions. The result was the hospital's first "clean" CMS survey in many years.

- Hospital management and labor participate in monthly meetings. These meetings are held individually with each union on campus (total of eight). The meetings last an hour and each union knows the times since they are set in advance.
- The agenda items are given the week before so everyone will have time to go over them and get any information that might be necessary.
- Once every quarter, the hospital holds a meeting with all the unions simultaneously. These meetings last usually about two hours and are designed to go over items that may be of "universal" usage, while the individual meetings are for more specific issues that concern only that union and its membership.
- I would like to add that St. Elizabeths Hospital CEO Joy Holland initiated a recognition and awards program in 2001, to honor employees' hard work and dedication. During that first ceremony, supported by contributions from managers, she learned that this was the first time hospital employees had been so honored. In fact, the 2003 ceremony was yesterday and continues to be supported by managers.
- In a similar manner, I initiated the Department's quarterly employee recognition program earlier this year. Our first ceremony recognized the achievements and accomplishments of 2002. We just completed our 2003 cycle, and we have asked employees to submit nominations for the 2004 first quarter awards.
- The Community Services Agency celebrated its employees' accomplishments in its first annual ceremony July 18. In addition to awards noting service to consumers, throughout the day, employees also engaged in various enrichment activities.
- The CSA labor-management committee meets the fourth Wednesday of each month at 10:00 a.m. Management

- participants are all executive level decision makers in the organization, including Juanita Price, the CSA CEO.
- The committee also has agreed to develop work groups to improve various aspects of the CSA. There has been significant discussion related to areas of potential conflict where the committee has agreed to disagree. These areas include:
 - Changes in position descriptions to comply with customer service mandates. Union officials received draft copies of revised position descriptions in June to review and provide comments by July 11, 2003, which reflects the customary 30-day review period.
 - Changes in work rules to meet obligations under the Mental Health Establishment Act. Staff was informed that they would no longer be required to complete daily itinerary reports. The daily itinerary reports were replaced with the submission of weekly appointment schedules at the suggestion of union officials. This process is designed to assist the Community Services Agency with establishing guidelines and indicators regarding the number of consumers receiving treatment, and to assist the budgeting process regarding how resources are being allocated throughout programs.
 - Establishing staff productivity standards.
- The committee has agreed to commission two sub-committees to address implementation issues related to the new restraint and seclusion rule and to increase joint efforts toward improving staff development and employee recognition.
- In April 2003, the CSA and the D.C. Nurses Association cohosted a luncheon to honor nurses during Nurses Month.
- As I stated earlier, we have not yet overcome the challenges of creating a true labor-management partnership within the Department of Mental Health, but I believe the assistance from Josh Williams and the willingness of union representatives and DMH managers will result in a viable LMPC in the future.

 Again, thank you for this opportunity. I will be happy to answer your questions.